



STATE OF RHODE ISLAND
DISTRICT COURT

SUMMONS
TWENTY (20) DAYS
LANDLORD — TENANT EVICTION
(FOR OTHER THAN NONPAYMENT OF RENT)

DIVISION	ADDRESS OF COURT	CIVIL ACTION NO
PLAINTIFF-LANDLORD	PLAINTIFF'S ATTORNEY	
VS	ADDRESS OF PLAINTIFF'S ATTORNEY OR PLAINTIFF	
DEFENDANT TENANT	DEFENDANT'S ADDRESS	

TO THE ABOVE NAMED DEFENDANT-TENANT: You are hereby served with a "COMPLAINT FOR EVICTION FOR NONCOMPLIANCE WITH RENTAL AGREEMENT" (R.I.G.L. 34-18-36), or "FOR UNLAWFULLY HOLDING OVER AFTER TERMINATION" or "EXPIRATION OF TENANCY" (R.I.G.L. 34-18-38), and three (3) blank answer forms. If you claim a defense, you must file an answer with the Clerk of the Court within TWENTY (20) days after you are served with this summons and complaint exclusive of the date of service. If you fail to file an answer you will be DEFAULTED. You are also required to mail a copy of the ANSWER to the attorney for the plaintiff-landlord whose name and address appears above. If the plaintiff-landlord does not have an attorney, then you must mail a copy of your ANSWER to the plaintiff-landlord. You should retain a copy of the answer for your file. This matter may be assigned for a hearing by you or the plaintiff-landlord by written motion. If you think the case is "settled" you should still file an ANSWER as hereinabove indicated and make sure that a written settlement is filed in the records of the court.

If you do nothing you will be DEFAULTED and JUDGMENT for possession of the premises in question and money damages could be entered against you.

COURT SEAL

DATE

CLERK

PROOF OF SERVICE

I hereby certify that on the date below I served a copy of this summons and a copy of the complaint and three (3) answer forms received herewith upon the above-named defendant by delivering or leaving said papers in the following manner:

- ☐ to the defendant personally.
- ☐ at his/her dwelling house or usual place of abode at the address entered below, with a person of suitable age and discretion then residing therein.
- ☐ to an agent named below authorized by appointment or by law to receive service of process.
- ☐ Further notice as required by statute was given as noted on the reverse side.

ADDRESS OF DWELLING UNIT OR USUAL PLACE OF ABODE

NAME OF AUTHORIZED AGENT OR PERSON OF SUITABLE AGE AND DISCRETION

DATE OF SERVICE

DEPUTY SHERIFF/CONSTABLE

SERVICE FEE \$